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PTO IDENTIFIER: Application Number 10/730,891-Conf. #5178 Patent Number		
Inventor: Ying Zhang et al.		
MESSAGE TO: US Patent and Trademark Office		
FAX NUMBER: (703) 872-9306		
FROM: CONNOLLY BOVE LODGE & HUTZ LLP Matthew J. Mason		
PHONE: (202) 331-7111		
Attorney Dkt. #: 20140-00317-US		
PAGES (Including Cover Sheet): 1		
CONTENTS:	Transmittal; Fee transmittal; Declaration 3 pages; Associate power of attorney 2 pages; Copy of Notice to File Missing Parts; and Certificate of fax transmission; Authorization to charge deposit account \$130.00 late declaration fee	
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PTO/SB/97 (12-97)

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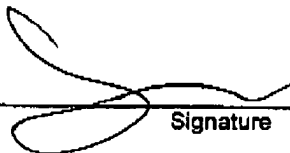
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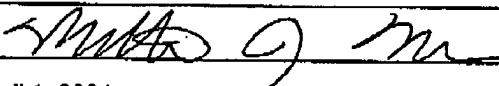
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/730,891-Conf. #5178	
	Filing Date	December 10, 2003	
	First Named Inventor	Ying Zhang	
	Art Unit	2811	
	Examiner Name	Not Yet Assigned	
Total Number of Pages in This Submission	1	Attorney Docket Number	20140-00317-US

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 (Declaration and Fees)	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address (Associate POA) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<div style="border: 1px solid black; padding: 5px; width: 150px; float: left; margin-bottom: 5px;">Remarks</div>		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	CONNOLLY BOVE LODGE & HUTZ LLP Matthew J. Mason - 44,904	
Signature		
Date	April 1, 2004	

PTO/SB/17 (10-03)
Approved for use through 7/31/2006. OMB 0851-0032
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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003, Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT		(\$)		130.00	
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Complete if Known	
Application Number	10/730,891-Conf. #5178
Filing Date	December 10, 2003
First Named Inventor	Ying Zhang
Examiner Name	Not Yet Assigned
Art Unit	2811
Attorney Docket No.	20140-00317-US

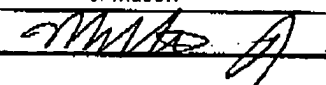
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	3. ADDITIONAL FEES	
<input checked="" type="checkbox"/> Depos & Account:	<input type="checkbox"/> Money Order		
<input type="checkbox"/> Other	<input type="checkbox"/> None		
Deposit Account Number	50-0510		
Deposit Account Name	IBM CORPORATION (YORKTOWN)		
The Director is authorized to: (check all that apply)			
<input checked="" type="checkbox"/> Charge fee(s) indicated below			
<input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)			
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.			

FEE CALCULATION					
1. BASIC FILING FEE					
Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	180	2006	80	Provisional filing fee	
SUBTOTAL (1)				(\$)	0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE					
Total Claims		Extra Claims		Fee from below	Fee Paid
Independent Claims					
Multiple Dependent					
Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	96	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple dependent claim, if not paid	
1204	86	2204	43	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)				(\$)	0.00

Other fee (specify)		SUBTOTAL (3)		(\$)	130.00
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Matthew J. Mason	Registration No. (Attorney/Agent)	44,904
Signature		Telephone	(202) 331-7111
		Date	April 1, 2004